



REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/782,472
Filing Date	02/18/2004
First Named Inventor	Jonathan Dale
Art Unit	3629
Examiner Name	Gabrielle A. McCormick
Attorney Docket Number	073338.0135 Confirmation No. 4871

This is a Request for Continued Examination (RCE) under 37 C.F.R. 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 C.F.R. § 1.114**

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on _____.
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☒ **Enclosed**
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ **Information Disclosure Statement (IDS)**
- iv. ☐ Other:

2. **Miscellaneous**

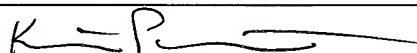
- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.117(i) required)
- b. ☐ Other _____

3. **Fees** The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. ☒ **The Director is hereby authorized to charge any additional fee or credit any overpayment to Deposit Account No. 02-0384.**
- i. ☒ **RCE fee required under 37 C.F.R. 1.17(e). The Director is hereby authorized to charge the fee of \$810.00 to Deposit Account No. 02-0384.**
- ii. ☐ _____-month extension of time fee (37 C.F.R. 1.136 and 1.17). The Director is hereby authorized to charge the fee of \$_____ to Deposit Account No. _____.
- iii. ☐ Other _____
- b. ☐ Check in the amount of \$_____ enclosed to cover the RCE fee
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	Kurt M. Pankratz	Registration No. (Attorney/Agent)	46,977
Signature		Date	July 6, 2009

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Box RCE, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450.